



## UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
 United States Patent and Trademark Office  
 Address: COMMISSIONER FOR PATENTS  
 P.O. Box 1450  
 Alexandria, Virginia 22313-1450  
 www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 4182

<b>SERIAL NUMBER</b> 10/593,776	<b>FILING OR 371(c) DATE</b> 09/22/2006 <b>RULE</b>	<b>CLASS</b> 424	<b>GROUP ART UNIT</b> 1646	<b>ATTORNEY DOCKET NO.</b> 053466-0420
------------------------------------	---	---------------------	-------------------------------	---

**APPLICANTS**  
 Masato Fujioka, Tokyo, JAPAN;  
 Hirotaka James Okano, Tokyo, JAPAN;  
 Kaoru Ogawa, Tokyo, JAPAN;  
 Hideyuki Okano, Tokyo, JAPAN;  
 Sho Kanzaki, Tokyo, JAPAN;

**\*\* CONTINUING DATA \*\*\*\*\***  
 This application is a 371 of PCT/JP05/06202 03/24/2005 *OK PM 8/29/07*

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***  
 JAPAN 2004-087270 03/24/2004  
 JAPAN 2004-268800 09/15/2004 *OK PM 8/29/07*

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED**  
**\*\* 05/31/2007**

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance <i>PM 8/29/07</i> Examiner's Signature Initials	<b>STATE OR COUNTRY</b> JAPAN	<b>SHEETS DRAWING</b> 7	<b>TOTAL CLAIMS</b> 45	<b>INDEPENDENT CLAIMS</b> 3
--	---	----------------------------------	----------------------------	---------------------------	--------------------------------

**ADDRESS**  
22428

**TITLE**  
Therapeutic Agents For Inner Ear Disorders Containing An Il-6 Antagonist As An Active Ingredient

<b>FILING FEE RECEIVED</b> 2150	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
------------------------------------	---	---